

Prevention Education Curricula Guidelines

A. Purpose

The Office of Family Planning (OFP) requires that the implementation of any curricula shall be reviewed and approved by OFP prior to use. ALL CURRICULA USED IN CALIFORNIA PUBLIC SCHOOLS MUST COMPLY WITH CALIFORNIA DEPARTMENT OF EDUCATION CODES, INCLUDING Chapter 5.6. CALIFORNIA COMPREHENSIVE SEXUAL HEALTH AND HIV/AIDS PREVENTION EDUCATION ACT otherwise known and referenced as SB 71. This review is to ensure that the information contained in educational materials is appropriate and adequate. (See Appendix R, Education Codes, Attachment 10, Curriculum Checklist, and Appendix C, Common Characteristics of Effective Curricula).

Pursuant to this RFA, the use of previously implemented curricula does not guarantee approval for this funding cycle.

For Grantees that will implement a comprehensive sexuality education curriculum in public schools, it is the responsibility of the agency to secure prior consent by the School District or Principal for its use.

B. Definitions

A curriculum is a written plan with specific content designed to deliver information in an educational format. The curriculum is a method intended to facilitate a learning experience. The purpose of the learning experience is to effect a change in awareness, knowledge, attitude, belief, behavioral intent, and/or behavior of a specific target population in connection with a particular Strategy, as stated in the CCG Project Workplan. For the 2005-2006 RFA, curricula that have not been evaluated as described below or known to OFP will not be approved for use. The following will be considered:

1. **An Evaluated curriculum:** is one that has been peer reviewed, field-tested, and published in at least one professional journal. The outcome objectives desired have been shown to be significant and effective with the target population(s).
2. **A Non-evaluated curriculum:** is one that has been previously reviewed and approved by OFP (CCG, MIP, I&E) programs. These curricula have been previously developed and implemented for those programs only, but not evaluated as described above.
3. **Modified curriculum:** an OFP-approved curriculum derived from a compilation of two or more evaluated curriculum for use by an educator, author or agency/institution for the purposes of adapting the content to more effectively address cultural, linguistic or the learning needs of a target population.

Funded agencies using evaluated or modified curricula must credit the original source(s) used by citing the author(s) and publisher of those sources on each of the reproduced curricula. Agencies should be aware of existing state and federal statutes pertaining to copyright infringement.

CCG funds may not be used for the development of curricula.

C. Curriculum Review and Approval Process

Review and approval of all proposed curricula shall be conducted by OPF prior to use of the curricula. All OFP/CCG funded Grantees are responsible for submitting copies of non-evaluated and modified curriculum that they, their subcontractors, and/or organizational partners intend to use in their CCG interventions. Previous use of curricula does not guarantee approval for current funding cycle.

Once the finalized version is submitted, the anticipated time to review and approval is 30 days from the date received. OFP reserves the right to extend that time in order to negotiate with the Grantee to revise or amend the proposed curriculum submitted.

D. Minimum Guidelines

Per section 51930 et seq. of the Education Code, the following are minimum guidelines for curriculum for both the grantee and/or funded subcontractors.

- *The curriculum should relay accurate information.* Pictures, charts, graphs, videos, and any other pictorial elements showing anatomy and /or physiology of the human body and organs referenced on the page(s) or credits shown on the document or product for the Project participants should be accurately portrayed in function, dimension, position, and relative size. The primary sources should be cited.
- *Content covering topics that include statistical and other epidemiological data (such as symptoms, illness, disease rates, and risks) should be up-to-date, that is, not more than five (5) years old.* Statistics cited should be referenced from the most recent data available from primary sources viewed as highly credible (i.e., Centers for Disease Control and Prevention, State of California, universities and other scientific bodies, such as the New York Academy of Sciences). Statistics and other data cited should be referenced and documented with either the primary or secondary source.

- *Curriculum content should state at least one overall goal and one learning objective.* All objectives should be clear and measurable. The desired change(s) in knowledge, attitudes, or behavior should be written at the beginning of

the curriculum or at the start of each topic or section listed in the curriculum's table of content. (*Douglas Kirby, Ph.D., No Easy Answers, March 1997 and Emerging Answers, Research Findings To Reduce Teen Pregnancy, May 2001*)

- *Curriculum content should be appropriate to the target population.* Written, pictorial, and electronic information should be appropriate to the learning needs of the target population in the following five (5) dimensions:
 - *Age*
 - *Culture/ethnicity*
 - *Literacy level/language,*
 - *Developmental needs (physical, cognitive/mental, emotional and social), and*
 - *Risk factor(s)*
- *The format should effectively address the learning needs of the target population.* The way that the curriculum is delivered should increase the likelihood that the educational content and materials will create the intended change in knowledge, attitudes and/or behavior. Format variation should be consistent with the learning needs of the target groups identified to receive the curriculum.

Examples of variation are: changing *duration* of sessions to match age-related needs (e.g. 12 year olds will attend an 6-week curriculum and 15 year olds will attend an 8 week curriculum); changing the *intensity* of sessions (e.g. 12 year olds will receive a 1 hour session and 13-15 year olds will receive a 1 1/2 hour session). Other examples: changing the materials to be used: 12 year olds may receive a more generalized presentation including a pictorial representation of the male and female anatomy and physiology while 12-14 year olds may receive a more realistic presentation including any of the following: more detailed graphic, view three dimensional models and a film/video.

- *Curriculum should address the consequences of teenage pregnancy.*
- *Curriculum content shall not contain or include any word(s), phrases, sentences, and pictorial representation or cite any statements of a religious or sectarian nature, nor indirectly relate to any values or symbols of a religious or sectarian nature.*

E. Required Elements of Curriculum for OFP Projects:

The following elements should be identified and included in a curriculum:

- 1) Title

- 2) Author(s), publisher and date of publication, as appropriate.
- 3) Intended target audience.
- 4) Overall rationale for the development of the curriculum (e.g. to address a specific unmet learning need by a target population for a specific reason).
- 5) Overall educational goal(s) of the curriculum.
- 6) Learning objectives are stated and measurable.
- 7) Overall delivery time for each (age of) target population (e.g. optimal duration or sequencing of sessions for maximum results/outcomes).
- 8) Number and length of each session for each (age of) target population.
- 9) Number of participants (minimum and maximum number that the format should allow).
- 10) Materials to be used (audiovisual, print and electronic).
- 11) Methodology used: specific instructional methods to be used with the curriculum contents (e.g. role play, small group discussion, lecture, interactive)
- 12) Other formats available (e.g. specific age-groups, languages). Instructor/facilitator guide, if applicable.
- 13) Qualifications/experience or recommended training of instructor in order to deliver curricula.
- 14) Successful experiences of agency or others that have used this or a similar curriculum with a comparable target population.
- 15) Express written permission from and credit to the author(s)/publisher(s) or primary source curriculum(s) to use specific components of those curricula.

F. Additional Recommendations

Although not required by CCG Projects, OFP acknowledges that the following criteria enhance the "staying power" or retention of the educational messages, increasing the overall effectiveness of a curriculum (*Douglas Kirby, Ph.D., No Easy Answers, March 1997, page 7; Claire Brindis, [et.al.](#) Communities Responding to the Challenge of Adolescent Pregnancy Prevention, Volumes II and III, 1998*)

- Curricula containing learning techniques or content that have been previously

tested, established in the scientific literature, or otherwise determined to be successful in impacting sexual behavior, including the delay of sexual involvement for youth, young teens or contraceptive use for older teens.

- Curricula containing a comprehensive focus; i.e. containing a combination of any of the following topics: self-esteem; decision-making; communication skills; interpersonal relations and/or assertiveness skill development.
- Curricula including referrals to community resources for appropriate health and social services.
- Curricula including skill-building component in terms of how to access community/health resources.

Table 1. Life Behaviors of a Sexually Healthy Adult

The goal of a comprehensive sexuality education program is to facilitate sexual health. After learning the six key concepts and associated topics, subconcepts, and developmental messages, at an appropriate age the student will demonstrate certain life behaviors.

A Sexually healthy adult will:

Human Development

- Appreciate one's own body.
- Seek further information about reproduction as needed.
- Affirm that human development includes sexual development, that may or may not include reproduction or genital sexual experience.
- Interact with both genders in respectful and appropriate ways.
- Affirm one's own orientation and respect the sexual orientation of others.

Relationships

- View family as a valuable source of support.
- Express love and intimacy in appropriate ways.
- Develop and maintain meaningful relationships.
- Avoid exploitative or manipulative relationships.
- Make informed choices about family options and relationships.
- Exhibit skills that enhance personal relationships.
- Understand how cultural heritage affects ideas about family, interpersonal relationships, and ethics.

Personal Skills

- Identify and live according to one's values.
- Take responsibility for one's own behavior.
- Practice effective decision-making.
- Communicate effectively with family, peers, and partners.

Sexual Behavior

- Enjoy and express one's sexuality throughout life.
- Express one's sexuality in ways congruent with one's values.
- Enjoy sexual feelings without necessarily acting on them.
- Discriminate between life-enhancing sexual behaviors and those that are harmful to self and/or others.
- Express one's sexuality while respecting the rights of others.
- Seek new information to enhance one's sexuality.
- Engage in sexual relationships that are consensual, non-exploitative, honest, pleasurable, and protected against disease and unintended pregnancy.

Sexual Health

- Use contraception effectively to avoid unintended pregnancy.
- Prevent sexual abuse.
- Act consistent with one's own values in dealing with an unintended pregnancy.
- Seek early prenatal care.
- Avoid contracting or transmitting a sexually transmitted disease, including HIV
- Practice health-promoting behaviors, such as regular check-ups, breast and testicular self-exam, and early identification of potential problems.

Society and Culture

- Demonstrate respect for people with different sexual values.
- Exercise democratic responsibility to influence legislation dealing with sexual issues.
- Assess the impact of family, cultural, religious, media, and societal messages on one's thoughts, feelings, values, and behaviors related to sexuality.
- Promote the rights of all people to accurate sexuality information.
- Avoid behaviors that exhibit prejudice and bigotry.
- Reject stereotypes about the sexuality of diverse populations.
- Educate others about sexuality.